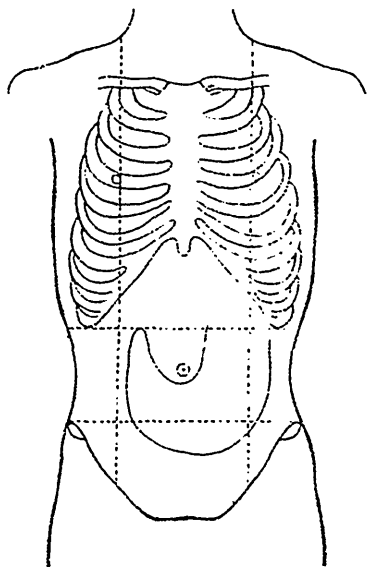


its size, position, and relation to the tumor. The abdominal wall was so thin and lax that the information was easily obtained, and is indicated by these marks on the abdomen.

The history and examination of this man show that there is organic stricture of the pyloric orifice, with moderate dilatation and marked prolapse of the stomach. The gradual formation of the pyloric obstruction has given time for some hypertrophy of the muscular coat of the stomach, as shown by the great peristalsis that is easily excited when the stomach has not been washed out for a day or two. If washed out, however, the peristalsis cannot be evoked even after taking



liquid or food: it seems necessary for the food to undergo changes that render it more irritating before it causes peristalsis.

That the stricture is not very narrow is shown by the fair state of nutrition, by the moderate quantity of stomach contents removed from time to time with the tube, and by the absence of extreme thirst and of great reduction in the quantity of urine. Little water is absorbed by the stomach, so that troublesome thirst and scanty urine are prominent symptoms of pyloric stenosis so marked as to prevent fluid from passing into the intestine.

The next question is as to the nature of the tumor, and on this the prognosis virtually turns. If it be a fibrous structure,